## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/994,860	
Filing Date	November 28, 2001	
First Named Inventor	BLUM, Bradley	
Art Unit	3752	
Examiner Name	BOECKMANN, Jason J.	
Attorney Docket Number	027001-000310US	

	ENCLOSURES (Check all that apply)									
After Allowance Communication to TC										
$\bowtie$	Fee Transmittal Form		Drawing(s)		<u> </u>					
	Fee Attached		Licensing-related Papers	5	of A	ppeals a	munication to Board and Interferences			
$\boxtimes$	Amendment/Reply		Petition				munication to TC ee, Brief, Reply Brief)			
	After Final		Petition to Convert to a Provisional Application		Proprie	rmation				
	Affidavits/declaration(s)		Power of Attorney, Revo Change of Corresponde Address		Status	Letter				
$\boxtimes$	Extension of Time Request		Terminal Disclaimer		bel bel	osure(s) (please identify				
	Express Abandonment Request		Request for Refund			2 - Request for Cont	plication Data Sheet; inued Examination;			
	Information Disclosure Statement		CD, Number of CD(s)		attaching US Assignment	PTO Re	ent Under 37 CFR 3.73(b), ecordation of Executed ecuted Power of Attorney			
			C Londonno Toble	an CD	to Prosecute 4 - Declaration Neil E. Rond 5 - Declaration Vickie Lien S 6 - Declaration	Application Under orf; on Under Singleton	ations Before the USPTO; or 37 C.F.R. § 1.132 for or 37 C.F.R. § 1.132 for			
			Landscape Table on CD Isaac Ginis.							
	Certified Copy of Priority Document(s)	Ren	Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.							
Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53										
	SIGNA	ATURE	OF APPLICANT, A	TTORNEY	, OR AGEN	Γ				
Firm N	Townsend and Town	nsend a	and Crew LLF							
Signat	ture Ag / l	$\langle f \rangle$	1/1/0							
Printe	Andrea D. Tiglio									
Date	November 5, 2007			Reg. No.	60,829					
CERTIFICATE OF TRANSMISSION/MAILING										
I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below.										
Signa	Signature									
Type	Typed or printed name   Joan M. Powell   Date   November 5, 2007									

										PTO/SB/17 (0	9-07
	ive on 12/08/20		10 4040			C	omp	lete if Kr	own		<u> </u>
Fees pursuant to the Consolid		·	`	Α	pplication Num	nber (	9/99	4,860			
FEE TRA	ANSI	VII I I /	4L	F	iling Date	1	Vove	mber 28	, 2001		
For FY 2007			F	irst Named Inv	entor I	BLUN	/I, Bradle	у			
Applicant claims small entity status. See 37 CFR 1.27				-[E	xaminer Name	ı	30E0	CKMANN	l, Jasc	n J.	
Applicant claims small	entity status.	366 31 CLK I	.21	- A	rt Unit	;	3752				
TOTAL AMOUNT OF PAYMENT (\$)				А	ttorney Docket	No.	027001-000310US				_
METHOD OF PAYMEN	r (check all	that apply)									
Check Credit	Card 🔲 N	Ioney Order	No	ne	Other (pl	ease ident	ify):				_
Deposit Account	Deposit Accour	nt Number: 20	-1430		_ Deposit Acco	unt Name	Town	send and	Townse	nd and Crew LLP	_
For the above-ide	ntified deposi	t account, the	Director is	here	by authorized	to: (checl	call th	at apply)			
Charge fee(s	) indicated be	low			Char	ge fee(s)	indica	ted below,	except	for the filing fee	
Charge any a	dditional fee(	s) or underpay	ments of f	ee(s)	) 🔽						
under 37 CFF WARNING: Information on thi	R 1.16 and 1.1	17			Credi	it any ove ot be inclu			Provide	credit card	
information and authorization	on PTO-2038.	Pawile. O									
FEE CALCULATION											
1. BASIC FILING, SEA					OU 5550	-VA		TION EE			
		FEES	SE		CH FEES mall Entity		Sm	TION FE all Entity	ES		
<b>Application Type</b>	Fee (\$)	Fee (\$)	Fee	e (\$)	Fee (\$)	<u>Fee</u>	(\$ <u>)</u>	Fee (\$)		Fees Paid (\$)	
Utility	310	155	5	10	255	21	.0	105			
Design	210	105	10	00	50	13	80	65			
Plant	210	105	3	10	155	16	60	80			
Reissue	310	155	5	10	255	62	20	310			
Provisional	210	100		0	0		0	0			
2. EXCESS CLAIM FEI	ES								Sm	nall Entity	
Fee Description								Fee (\$)		Fee (\$)	
Each claim over 20 (			icenee)					50 210		25 105	
Each independent claim over 3 (including Reissues) Multiple dependent claims							370		185		
Total Claims	Extra Clain	ns <u>Fee (</u>	(\$) <u>F</u>	ee F	Paid (\$)					ndent Claims	
-20 or HP		XX	= _		<del></del>			<u>Fee (\$)</u>		Fee Paid (\$)	
HP = highest number of total cl Indep. Claims	aıms paid for, if Extra Clain		<u>(\$)</u> <u>F</u>	ee F	Paid (\$)				_		
		x									
HP = highest number of indepe		id for, if greater	than 3								
3. APPLICATION SIZE If the specification and	FEE	wasad 100 ah	oots of n	020	. (avaluding a	lactron	cally	filed sea	uence .	or computer	
listings under 37 C	FR 1.52(e)).	the applicat	ion size	apei fee d	lue is \$260 (\$	\$130 for	smal	l entity)	for eacl	h additional 50	
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets	Extra Shee				h additional 50				ee (\$)	Fee Paid (\$)	
- 100 =	<del></del>	_ / 50 = _		_ (	round <b>up</b> to a v	whole nur	nber)	х		_ =	
4. OTHER FEE(S)										Fees Paid (\$	1
Non-English Speci	fication,	\$130 fee (no									_
Other (e.g., late filing surcharge): (Small Entity) RCE Fee of \$405.00; (Small Entity)  Three Month Extension of Time of \$525.00 930.00											
A life With Extension of Time of \$525.00											
SUBMITTED BY	1/1		//								_
Signature	Cuk	1/1/1	2	Reg (At	gistration No. torney/Agent)	60,82	9	Tele	phone	202-481-9946	
Name (Print/Typé) Andr	ea D. Tiglio	× 11 4	-					Date	Nov	ember 5, 2007	
61200676 VT										<del></del>	